

**COMPARISON OF FISCAL IMPACTS OF REGULAR POLICY CHANGES
CURRENT YEAR COMPARED TO BUDGET YEAR
FISCAL YEARS 2007-08 AND 2008-09**

NO.	POLICY CHANGE TITLE	NOV. 2007 EST. FOR 2007-08		NOV. 2007 EST. FOR 2008-09		DIFFERENCE	
		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
	ELIGIBILITY						
1	FAMILY PLANNING INITIATIVE	\$432,110,000	\$129,831,900	\$440,681,000	\$132,407,600	\$8,571,000	\$2,575,700
2	BREAST AND CERVICAL CANCER TREATMENT	\$125,395,000	\$56,325,350	\$131,956,000	\$61,966,600	\$6,561,000	\$5,641,250
3	CHDP GATEWAY - PREENROLLMENT	\$18,678,000	\$6,537,300	\$18,678,000	\$6,537,300	\$0	\$0
4	BRIDGE TO HFP	\$14,315,000	\$5,010,250	\$18,908,000	\$6,617,800	\$4,593,000	\$1,607,550
5	REFUGEES	\$5,846,000	\$5,846,000	\$6,442,000	\$6,442,000	\$596,000	\$596,000
6	PE FOR HFP DISENROLLEES	\$2,392,820	\$1,196,410	\$5,166,080	\$2,583,040	\$2,773,260	\$1,386,630
7	ELIG. FOR CHILDREN IN MONTH PRIOR TO SSI/SSP GR	\$4,997,740	\$2,498,870	\$5,079,000	\$2,539,500	\$81,260	\$40,630
8	SHIFT OF CCS STATE/COUNTY COSTS TO MEDI-CAL	\$1,500,000	\$750,000	\$1,500,000	\$750,000	\$0	\$0
9	BCCTP RETROACTIVE COVERAGE	\$111,760	\$39,120	\$170,060	\$59,520	\$58,300	\$20,410
10	SB 437 - SELF-CERTIFICATION	\$0	\$0	\$22,848,710	\$11,424,360	\$22,848,710	\$11,424,360
13	STATE-FUNDED KINGAP	\$0	\$0	\$0	\$35,000	\$0	\$35,000
15	ACCELERATED ENROLLMENT-SCHIP TITLE XXI	\$0	\$0	\$0	\$0	\$0	\$0
16	NEW QUALIFIED ALIENS	\$0	\$113,334,500	\$0	\$129,893,000	\$0	\$16,558,500
17	RESOURCE DISREGARD - % PROGRAM CHILDREN	\$0	-\$28,174,050	\$0	-\$34,656,450	\$0	-\$6,482,400
145	REINSTATE QUARTERLY STATUS REPORTS FOR PARE	\$0	\$0	-\$17,247,000	-\$8,623,500	-\$17,247,000	-\$8,623,500
146	REDUCE CEC AND RESTORE QUARTERLY STATUS REI	\$0	\$0	-\$167,063,360	-\$83,531,680	-\$167,063,360	-\$83,531,680
	ELIGIBILITY SUBTOTAL	\$605,346,310	\$293,195,640	\$467,118,490	\$234,444,090	-\$138,227,830	-\$58,751,560
	BENEFITS						
18	ADULT DAY HEALTH CARE - CDA	\$387,644,000	\$193,822,000	\$407,265,000	\$203,632,500	\$19,621,000	\$9,810,500
19	LOCAL EDUCATION AGENCY (LEA) PROVIDERS	\$175,000,000	\$0	\$175,000,000	\$0	\$0	\$0
20	MULTIPURPOSE SENIOR SERVICES PROGRAM-CDA	\$50,516,000	\$25,258,000	\$50,516,000	\$25,258,000	\$0	\$0
21	HUMAN PAPILLOMAVIRUS VACCINE	\$10,831,460	\$5,415,730	\$11,474,000	\$5,737,000	\$642,540	\$321,270
22	PRENATAL SCREENING EXPANSION	\$8,990,210	\$4,495,110	\$9,155,000	\$4,577,500	\$164,790	\$82,400
23	HOME TOCOLYTIC THERAPY	\$2,055,630	\$1,027,810	\$4,299,060	\$2,149,530	\$2,243,440	\$1,121,720
24	CONLAN V. BONTA	\$4,023,000	\$2,011,500	\$3,896,000	\$1,948,000	-\$127,000	-\$63,500

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		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
	BENEFITS						
25	NEWBORN HEARING SCREENS EXPANSION	\$903,140	\$451,570	\$2,572,180	\$1,286,090	\$1,669,040	\$834,520
26	GENETIC DISEASE TESTING FEE INCREASE	\$3,031,430	\$1,515,720	\$3,087,000	\$1,543,500	\$55,570	\$27,780
27	NF A/B LEVEL OF CARE GROWTH	\$615,000	\$307,500	\$3,120,000	\$1,560,000	\$2,505,000	\$1,252,500
28	SELF-DIRECTED SERVICES WAIVER - CDDS	\$148,000	\$0	\$7,175,000	\$0	\$7,027,000	\$0
29	MONEY FOLLOWS THE PERSON DEMONSTRATION CO	\$87,000	\$22,000	\$4,063,000	\$1,077,500	\$3,976,000	\$1,055,500
30	NEW SERVICES FOR NF/AH & IHO WAIVERS	\$240,310	\$120,160	\$248,000	\$124,000	\$7,690	\$3,840
31	CDSS SHARE OF COST PAYMENT FOR IHSS	\$0	\$4,056,500	\$0	\$4,056,500	\$0	\$0
32	FAMILY PACT STATE ONLY SERVICES	\$0	\$2,500,000	\$0	\$2,500,000	\$0	\$0
33	SCHIP FUNDING FOR PRENATAL CARE	\$0	-\$128,824,800	\$0	-\$114,651,750	\$0	\$14,173,050
34	MONEY FOLLOWS THE PERSON DEMONSTRATION SA	-\$112,000	-\$56,000	-\$4,182,000	-\$2,091,000	-\$4,070,000	-\$2,035,000
35	EXPANSION OF NF/AH WAIVER (SB 643)	-\$1,230,000	-\$615,000	\$201,000	\$100,500	\$1,431,000	\$715,500
36	ADULT DAY HEALTH CARE REFORMS	-\$6,060,760	-\$3,030,380	-\$9,544,080	-\$4,772,040	-\$3,483,320	-\$1,741,660
136	UNSPECIFIED BUDGET REDUCTION	-\$254,534,000	-\$136,717,500	-\$644,900,000	-\$331,900,000	-\$390,366,000	-\$195,182,500
143	DISCONTINUE ADULT SPEECH THERAPY SERVICES	\$0	\$0	-\$900,000	-\$450,000	-\$900,000	-\$450,000
144	DISCONTINUE ADULT CHIROPRACTIC SERVICES	\$0	\$0	-\$757,120	-\$378,560	-\$757,120	-\$378,560
148	DISCONTINUE ADULT ACUPUNCTURE SERVICES	-\$54,860	-\$27,430	-\$5,679,740	-\$2,839,870	-\$5,624,880	-\$2,812,440
149	DISCONTINUE ADULT PSYCHOLOGY SERVICES	\$0	\$0	-\$502,660	-\$251,330	-\$502,660	-\$251,330
150	DISCONTINUE ADULT PODIATRY SERVICES	\$0	\$0	-\$3,383,300	-\$1,691,650	-\$3,383,300	-\$1,691,650
154	DISCONTINUE ADULT OPTOMETRY/OPTOMETRIST SE	\$0	\$0	-\$2,070,000	-\$1,035,000	-\$2,070,000	-\$1,035,000
155	DISCONTINUE ADULT OPTICIAN/OPTICAL LAB SERVICE	\$0	\$0	-\$12,319,100	-\$6,159,550	-\$12,319,100	-\$6,159,550
156	DISCONTINUE ADULT AUDIOLOGY SERVICES	\$0	\$0	-\$3,100,000	-\$1,550,000	-\$3,100,000	-\$1,550,000
157	DISCONTINUE ADULT OPTIONAL DENTAL SERVICES	-\$19,158,000	-\$9,579,000	-\$229,900,000	-\$114,950,000	-\$210,742,000	-\$105,371,000
	BENEFITS SUBTOTAL	\$362,935,550	-\$37,846,520	-\$235,166,760	-\$327,170,130	-\$598,102,310	-\$289,323,610
	PHARMACY						
37	HIV/AIDS PHARMACY PILOT PROGRAM	\$0	\$1,251,000	\$0	\$1,327,500	\$0	\$76,500

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		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
	PHARMACY						
38	NON FFP DRUGS	\$0	\$545,000	\$0	\$487,000	\$0	-\$58,000
39	ENTERAL NUTRITION PRODUCTS	-\$4,622,400	-\$2,311,200	-\$13,379,850	-\$6,689,930	-\$8,757,450	-\$4,378,730
40	NEW THERAPEUTIC CATEGORY REVIEWS/REBATES	-\$5,192,710	-\$2,596,350	-\$8,378,570	-\$4,189,290	-\$3,185,870	-\$1,592,930
41	MEDICAL SUPPLY CONTRACTING	-\$5,978,620	-\$2,989,310	-\$9,978,950	-\$4,989,470	-\$4,000,330	-\$2,000,160
42	MEDICAL SUPPLY REBATES	-\$4,000,000	-\$2,000,000	-\$5,500,000	-\$2,750,000	-\$1,500,000	-\$750,000
43	DRUG REIMBURSEMENT REDUCTION	\$0	\$0	-\$4,668,500	-\$2,334,250	-\$4,668,500	-\$2,334,250
44	AGED DRUG REBATE RESOLUTION	-\$9,000,000	-\$4,486,000	-\$9,000,000	-\$4,486,000	\$0	\$0
45	FAMILY PACT DRUG REBATES	-\$32,734,000	-\$13,236,500	-\$34,047,000	-\$13,767,600	-\$1,313,000	-\$531,100
46	DISPUTED DRUG REBATE RESOLUTIONS	-\$40,000,000	-\$19,749,600	-\$40,000,000	-\$19,749,600	\$0	\$0
47	STATE SUPPLEMENTAL DRUG REBATES	-\$320,366,000	-\$159,684,600	-\$355,081,000	-\$176,988,100	-\$34,715,000	-\$17,303,500
48	FEDERAL DRUG REBATE PROGRAM	-\$674,535,000	-\$336,217,900	-\$747,629,000	-\$372,651,300	-\$73,094,000	-\$36,433,400
153	DISCONTINUE ADULT INCONTINENCE CREAMS & WASI	-\$780,000	-\$390,000	-\$9,370,000	-\$4,685,000	-\$8,590,000	-\$4,295,000
	PHARMACY SUBTOTAL	-\$1,097,208,720	-\$541,865,460	-\$1,237,032,870	-\$611,466,030	-\$139,824,140	-\$69,600,570
	MANAGED CARE						
54	MANAGED CARE INTERGOVERNMENTAL TRANSFERS	\$66,362,000	\$33,181,000	\$86,816,000	\$43,408,000	\$20,454,000	\$10,227,000
57	MANAGED CARE EXPANSION - SAN LUIS OBISPO	\$11,179,000	\$5,589,500	\$2,606,000	\$1,303,000	-\$8,573,000	-\$4,286,500
58	MANAGED CARE EXPANSION - MARIN	\$9,233,000	\$4,616,500	\$2,146,000	\$1,073,000	-\$7,087,000	-\$3,543,500
59	RISK PAYMENTS FOR MANAGED CARE PLANS	\$8,000,000	\$4,000,000	\$8,000,000	\$4,000,000	\$0	\$0
60	COVERAGE FOR FORMER AGNEWS RESIDENTS	\$886,000	\$443,000	\$6,493,000	\$3,246,500	\$5,607,000	\$2,803,500
62	MANAGED CARE EXPANSION - PLACER	\$2,311,000	\$1,155,500	\$280,000	\$140,000	-\$2,031,000	-\$1,015,500
64	MANAGED CARE NEW QUALIFIED ALIENS ADJUSTMEN	\$0	-\$29,869,600	\$0	\$0	\$0	\$29,869,600
65	MANAGED CARE ELIGIBILITY ADJUSTMENTS	\$0	\$823,000	\$0	\$0	\$0	-\$823,000
66	FFS COSTS FOR MANAGED CARE ENROLLEES	\$0	\$0	\$0	\$0	\$0	\$0
67	SBRHA CARVE-OUT OF AIDS DRUGS	-\$53,000	-\$26,500	\$0	\$0	\$53,000	\$26,500
162	REDUCTION TO MULTIPURPOSE SENIOR SERVICES PF	\$0	\$0	-\$5,052,000	-\$2,526,000	-\$5,052,000	-\$2,526,000

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	MANAGED CARE						
	MANAGED CARE SUBTOTAL	\$97,918,000	\$19,912,400	\$101,289,000	\$50,644,500	\$3,371,000	\$30,732,100
	PROVIDER RATES						
68	NF-B RATE CHANGES AND QA FEE	\$65,435,940	\$32,717,970	\$186,384,350	\$93,192,180	\$120,948,410	\$60,474,200
69	NON-CONTRACT HOSP. 10% INTERIM RATE RED.	\$41,057,000	\$20,528,500	\$8,676,000	\$4,338,000	-\$32,381,000	-\$16,190,500
70	LTC RATE ADJUSTMENT	\$16,879,100	\$8,439,550	\$58,581,960	\$29,290,980	\$41,702,860	\$20,851,430
71	ANNUAL MEI INCREASE FOR FQHCS/RHCS	\$44,835,830	\$22,417,920	\$47,182,790	\$23,591,400	\$2,346,960	\$1,173,480
72	HOSPICE RATE INCREASES	\$7,743,880	\$3,871,940	\$15,027,910	\$7,513,960	\$7,284,030	\$3,642,020
73	NF/AH (NF A/B LOC) WAIVER CAP INCREASE	\$4,973,530	\$2,486,770	\$8,846,460	\$4,423,230	\$3,872,930	\$1,936,460
74	DME REIMBURSEMENT CHANGES	\$8,125,560	\$4,062,780	\$9,194,000	\$4,597,000	\$1,068,440	\$534,220
137	FAMILY PLANNING RATE INCREASE	\$28,041,000	\$6,059,000	\$126,796,000	\$33,619,700	\$98,755,000	\$27,560,700
147	REDUCTION TO PROVIDER PAYMENTS BY 10%	-\$66,826,000	-\$33,433,000	-\$1,212,000,000	-\$602,400,000	-\$1,145,174,000	-\$568,967,000
151	REDUCTION TO LTC PROVIDER PAYMENTS BY 10%	\$0	\$0	-\$113,502,740	-\$56,751,370	-\$113,502,740	-\$56,751,370
158	REDUCTION TO NON-CONTRACT HOSP BY 10%	\$0	\$0	-\$60,065,690	-\$30,032,840	-\$60,065,690	-\$30,032,840
	PROVIDER RATES SUBTOTAL	\$150,265,850	\$67,151,420	-\$924,878,940	-\$488,617,770	-\$1,075,144,790	-\$555,769,200
	HOSPITAL FINANCING						
75	HOSP FINANCING - DSH PMT	\$1,617,872,000	\$585,722,500	\$1,617,708,000	\$585,128,500	-\$164,000	-\$594,000
76	HOSP FINANCING - PRIVATE HOSPITAL DSH REPLACEMENT	\$485,949,000	\$242,974,500	\$477,742,000	\$238,871,000	-\$8,207,000	-\$4,103,500
77	HOSP FINANCING - SAFETY NET CARE POOL	\$461,181,000	\$0	\$407,821,000	\$0	-\$53,360,000	\$0
78	HOSP FINANCING - PRIVATE HOSPITAL SUPP PMT	\$284,284,000	\$142,142,000	\$274,386,000	\$137,193,000	-\$9,898,000	-\$4,949,000
79	HOSP FINANCING-DPH PHYSICIAN & NON-PHYSICIAN C	\$226,721,000	\$0	\$86,788,000	\$0	-\$139,933,000	\$0
80	HOSP FINANCING - HEALTH CARE COVERAGE INITIATIVE	\$135,000,000	\$0	\$180,000,000	\$0	\$45,000,000	\$0
81	HOSP FINANCING - STABILIZATION FUNDING	\$100,903,000	\$50,451,500	\$24,200,000	\$12,100,000	-\$76,703,000	-\$38,351,500
82	HOSP FINANCING - SOUTH LA PRESERVATION FUND	\$80,396,000	\$0	\$98,975,000	\$0	\$18,579,000	\$0
83	HOSP FINANCING - DISTRESSED HOSPITAL FUND	\$64,998,000	\$32,499,000	\$29,624,000	\$14,812,000	-\$35,374,000	-\$17,687,000
84	HOSP FINANCING - DPH INTERIM RECONCILIATION	\$43,211,000	\$0	\$21,606,000	\$0	-\$21,605,000	\$0

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	<u>HOSPITAL FINANCING</u>						
85	HOSP FINANCING - CCS AND GHPP	\$26,000,000	\$0	\$26,000,000	\$0	\$0	\$0
86	HOSP FINANCING - DPH INTERIM RATE GROWTH	\$9,337,000	\$4,668,500	\$48,291,000	\$24,145,500	\$38,954,000	\$19,477,000
87	HOSP FINANCING - NDPH SUPPLEMENTAL PMT	\$4,298,000	\$2,149,000	\$3,800,000	\$1,900,000	-\$498,000	-\$249,000
88	HOSP FINANCING - MIA LTC	\$0	-\$14,743,000	\$0	-\$18,450,000	\$0	-\$3,707,000
89	HOSP FINANCING - BCCTP	\$0	\$0	\$0	\$0	\$0	\$0
90	BASE ADJUSTMENT - DPH INTERIM RATE	\$0	-\$375,315,500	\$0	-\$488,429,500	\$0	-\$113,114,000
91	HOSP FINANCING - DPH RATE RECONCILIATION	-\$30,528,000	-\$30,528,000	\$0	\$0	\$30,528,000	\$30,528,000
152	REDUCTION TO HOSP. FINANCING-DPH SNCP BY 10%	\$0	\$0	-\$7,750,000	-\$7,750,000	-\$7,750,000	-\$7,750,000
159	REDUCTION TO PRIVATE AND NDPH DSH PAYMENT BY	\$0	\$0	-\$47,300,000	-\$24,000,000	-\$47,300,000	-\$24,000,000
	HOSPITAL FINANCING SUBTOTAL	\$3,509,622,000	\$640,020,500	\$3,241,891,000	\$475,520,500	-\$267,731,000	-\$164,500,000
	<u>SUPPLEMENTAL PMNTS.</u>						
92	CAPITAL PROJECT DEBT REIMBURSEMENT	\$127,945,000	\$63,972,500	\$103,854,000	\$50,927,000	-\$24,091,000	-\$13,045,500
93	HOSPITAL OUTPATIENT SUPPLEMENTAL PAYMENT	\$125,000,000	\$0	\$130,000,000	\$0	\$5,000,000	\$0
94	IGT FOR NON-SB 1100 HOSPITALS	\$100,000,000	\$50,000,000	\$100,000,000	\$50,000,000	\$0	\$0
95	FREESTANDING CLINICS & VETERANS' HOMES SUPPL.	\$65,000,000	\$0	\$65,000,000	\$0	\$0	\$0
96	FFP FOR LOCAL TRAUMA CENTERS	\$44,530,000	\$22,265,000	\$44,530,000	\$22,265,000	\$0	\$0
97	CERTIFICATION PAYMENTS FOR DP-NFS	\$37,800,000	\$0	\$39,700,000	\$0	\$1,900,000	\$0
98	DSH OUTPATIENT PAYMENT METHOD CHANGE	\$12,500,000	\$6,250,000	\$10,000,000	\$5,000,000	-\$2,500,000	-\$1,250,000
99	SRH OUTPATIENT PAYMENT METHOD CHANGE	\$8,000,000	\$4,000,000	\$8,000,000	\$4,000,000	\$0	\$0
	SUPPLEMENTAL PMNTS. SUBTOTAL	\$520,775,000	\$146,487,500	\$501,084,000	\$132,192,000	-\$19,691,000	-\$14,295,500
	<u>OTHER</u>						
111	HEALTHY FAMILIES - CDMH	\$25,034,000	\$0	\$28,071,000	\$0	\$3,037,000	\$0
112	NURSE-TO-PATIENT RATIOS FOR HOSPITALS	\$18,105,000	\$9,052,500	\$0	\$0	-\$18,105,000	-\$9,052,500
115	MINOR CONSENT SETTLEMENT	\$9,098,000	\$9,098,000	\$8,728,000	\$8,728,000	-\$370,000	-\$370,000
119	TWO-PLAN MODEL NOTICES OF DISPUTE	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$0	\$0

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	OTHER						
121	ESTATE RECOVERY REGULATIONS	\$819,000	\$409,500	\$819,000	\$409,500	\$0	\$0
122	ANTI-FRAUD EXPANSION FOR FY 2004-05	\$0	\$0	\$0	\$0	\$0	\$0
123	INDIAN HEALTH SERVICES	\$0	-\$6,000,000	\$0	-\$6,000,000	\$0	\$0
124	STATE-ONLY IMD ANCILLARY SERVICES	\$0	\$36,000,000	\$0	\$12,000,000	\$0	-\$24,000,000
125	CIGARETTE AND TOBACCO SURTAX FUNDS	\$0	\$0	\$0	\$0	\$0	\$0
126	ANTI-FRAUD EXPANSION FOR FY 2006-07	-\$46,730,000	-\$23,365,000	-\$46,730,000	-\$23,365,000	\$0	\$0
127	NON-INSTITUTIONAL PROVIDER OVERPAYMENTS	\$0	\$67,000,000	\$0	\$52,000,000	\$0	-\$15,000,000
128	ANTI-FRAUD EXPANSION FOR FY 2005-06	\$0	\$0	\$0	\$0	\$0	\$0
129	ANTI-FRAUD EXPANSION FOR FY 2008-09	\$0	\$0	-\$29,929,390	-\$14,964,690	-\$29,929,390	-\$14,964,690
130	MEDICAL SUPPORT ENHANCEMENTS	-\$704,130	-\$352,060	-\$2,005,390	-\$1,002,700	-\$1,301,260	-\$650,630
131	ENHANCED RECOVERIES GENERATED BY DRA OF 200	-\$1,006,420	-\$503,210	-\$1,986,000	-\$993,000	-\$979,590	-\$489,790
132	DENTAL RETROACTIVE RATE CHANGES	-\$2,286,000	-\$1,143,000	\$0	\$0	\$2,286,000	\$1,143,000
133	EDS COST CONTAINMENT PROJECTS	-\$7,672,660	-\$3,836,330	-\$7,360,000	-\$3,680,000	\$312,660	\$156,330
134	ANTI-FRAUD EXPANSION FOR FY 2007-08	-\$26,368,000	-\$13,184,000	-\$58,721,000	-\$29,360,500	-\$32,353,000	-\$16,176,500
138	ICF-DD TRANSPORTATION AND DAY CARE COSTS- CD	\$35,816,000	\$0	\$44,000,000	\$0	\$8,184,000	\$0
140	DELAY CHECKWRITE JUNE 2008 TO JULY 2008	-\$330,000,000	-\$165,000,000	\$0	\$0	\$330,000,000	\$165,000,000
142	DISCONTINUE PART B PREMIUM FOR UNMET SOC BEN	-\$8,400,000	-\$4,200,000	-\$100,200,000	-\$50,100,000	-\$91,800,000	-\$45,900,000
160	REDUCTION TO PERSONAL CARE SERVICES (MISC. SV	\$0	\$0	-\$201,579,000	\$0	-\$201,579,000	\$0
161	REDUCTION TO MENTAL HEALTH DRUG MEDI-CAL-CD/	\$0	\$0	-\$6,063,000	\$0	-\$6,063,000	\$0
163	REDUCTION TO DEVEL. CTRS/STATE OP. SMALL FAC.	-\$794,000	\$0	-\$7,258,000	\$0	-\$6,464,000	\$0
164	REDUCTION TO TCM AND HCBS WAIVERS-CDDS	\$0	\$0	-\$95,221,000	\$0	-\$95,221,000	\$0
	OTHER SUBTOTAL	-\$334,089,200	-\$95,023,600	-\$474,434,780	-\$55,328,390	-\$140,345,570	\$39,695,210
	GRAND TOTAL	\$3,815,564,780	\$492,031,880	\$1,439,869,140	-\$589,781,240	-\$2,375,695,650	-\$1,081,813,120

Costs shown include application of payment lag factor, but not percent reflected in base calculation.